First Hand

Making sense of lasting memories and emotions after the suicide of someone you didn't know







Support After Suicide Partnership



Grassroots Suicide Prevention

- Working to prevent suicide since 2006
- Trained over 20,000 people
- Strong community connections
- Find out more at: www.prevent-suicide.org.uk

Thrive LDN

Thrive LDN was launched In July 2017 by the Mayor of London, alongside other health and care partners.

The aim: to create a collective action across London, for everyone to speak openly about mental health and have an equal opportunity to thrive.

At it's core it is a **participation-driven partnership** that engages with and responds to the needs and insights of Londoners.

Since March 2020, we have been coordinating the **public mental health response** to the COVID-19 pandemic on behalf of Public Health England (London) and wider partners.

Thrive LDN is the regional lead for suicide prevention in London on behalf of NHS England and facilitate the multiagency Thrive LDN Suicide Prevention Group to deliver citywide projects to prevent suicide and support those affected.

Support After Suicide Partnership

Founded in 2013 the Support After Suicide Partnership (SASP) is a nation-wide network of over 80 members and supporters.

Our vision is that Everyone bereaved or affected by suicide is offered timely and appropriate support.

We are a membership organisation bringing together national and local organisations involved in delivering suicide bereavement support across the UK and to address the need for formal, multi-agency, proactive suicide bereavement support.

We provide:

- Hubs for public and for commissioners
- Partnerships: National Bereavement Service, Coroner's Court Support Service, Tell Us Once
- Leading change
- Supporting the implementation of the NHS Long Term Plan
- Building a national multi-agency network

Sussex Health & Care Partnership

Across Sussex, the NHS and local councils that look after social care and public health are working together to improve health and care.

The Sussex Health and Care Partnership (SHCP) brings together 13 organisations into what is known as an integrated care system (ICS).

They take collective action to improve the health of local people, ensure that health and care services are high-quality and to make the most efficient use of resources.

www.sussexhealthandcare.uk

Acknowledgements

- Sarah Bates Support After Suicide Partnership
- Liz Tucker Brighton & Hove City Council, Public Health
- Amanda Duffy Independent Strategic Communications Consultant

Workshop Aims

Progress and Challenges

An overview of the project, its aims, objectives, successes and next steps

Lived Experience

Understanding how lived experience both from the public and professionals helped to inform its creation

Discussion

Thinking about how we can share *First Hand* through your networks and continue to improve it



First Hand is for anyone affected by witnessing a suicide, when they did not know the person who has died.

This may be because you happened to be at a particular location, or because your job involves responding to these incidents.

www.first-hand.org.uk



"OBVIOUSLY, I AM NOT THE PRIORITY WHEN SOMEONE HAS DIED. BUT THERE WAS A SENSE THAT I DIDN'T HAVE ANYONE TO FOLLOW UP WITH, OR ANY COMMUNICATION ABOUT WHERE I COULD FIND SOMEONE TO TALK TO ABOUT IT. IT ISN'T EASY TO TALK ABOUT, EVEN WITH FRIENDS."

—PETE, MEMBER OF THE PUBLIC



"THE EFFECT OF A CLOSE EXPERIENCE OF SUICIDE IS **PROFOUND, TRAUMATIC AND LIFE CHANGING...**HELPING THOSE AFFECTED IS ALL OUR RESPONSIBILITY AND **FIRST HAND GIVES EFFECTIVE, PRACTICAL ADVICE** FOR ANYONE WHO HAS WITNESSED THIS DISTRESSING AND DISTURBING EVENT."

-DR ADRIAN JAMES, PRESIDENT OF THE ROYAL COLLEGE OF PSYCHIATRISTS

Sussex ICS and Thrive LDN specifications had very similar aims and objectives

- Provide support, advice and signposting for people who have witnessed a suicide
- Aimed at both public and professionals
- Content to be guided by people with lived experience
- Develop a model of support based on a review of the evidence
- Achieve a sustainable resource for ongoing use

Serendipity leads to a Partnership

Consultation,























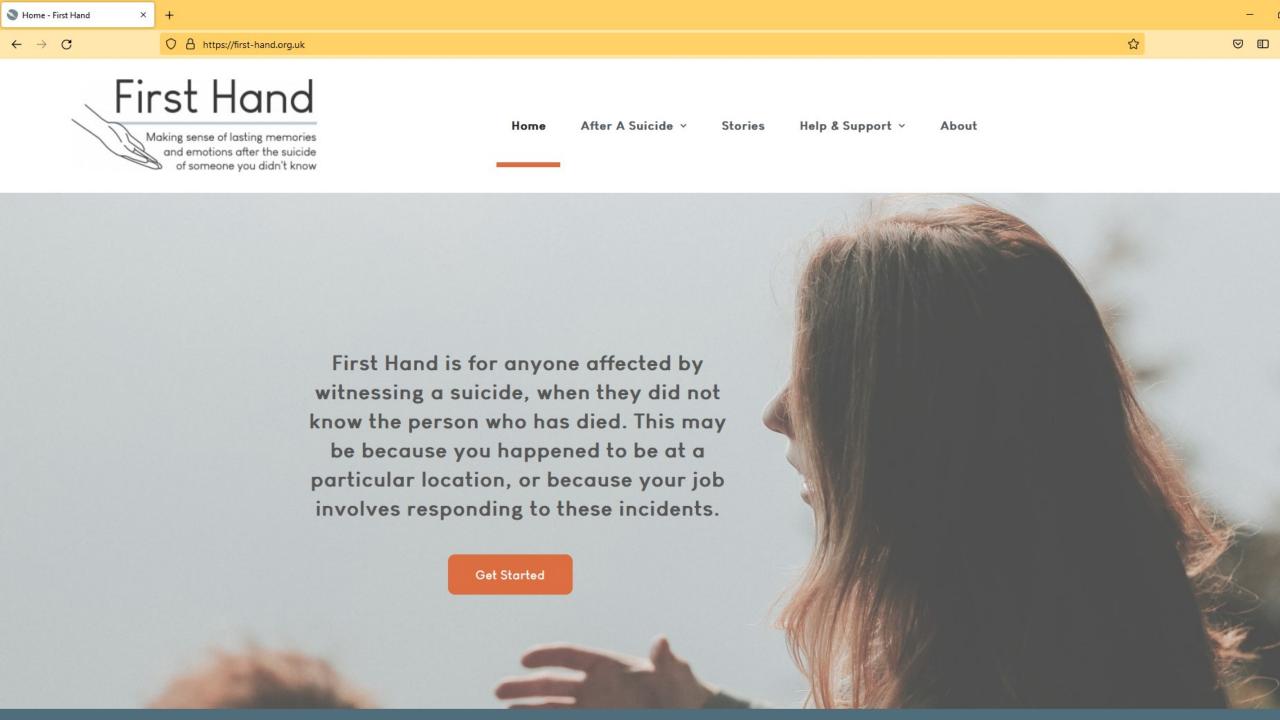


First Hand

Jo's story

First Hand

Helen's story





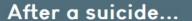












First few days

First few weeks

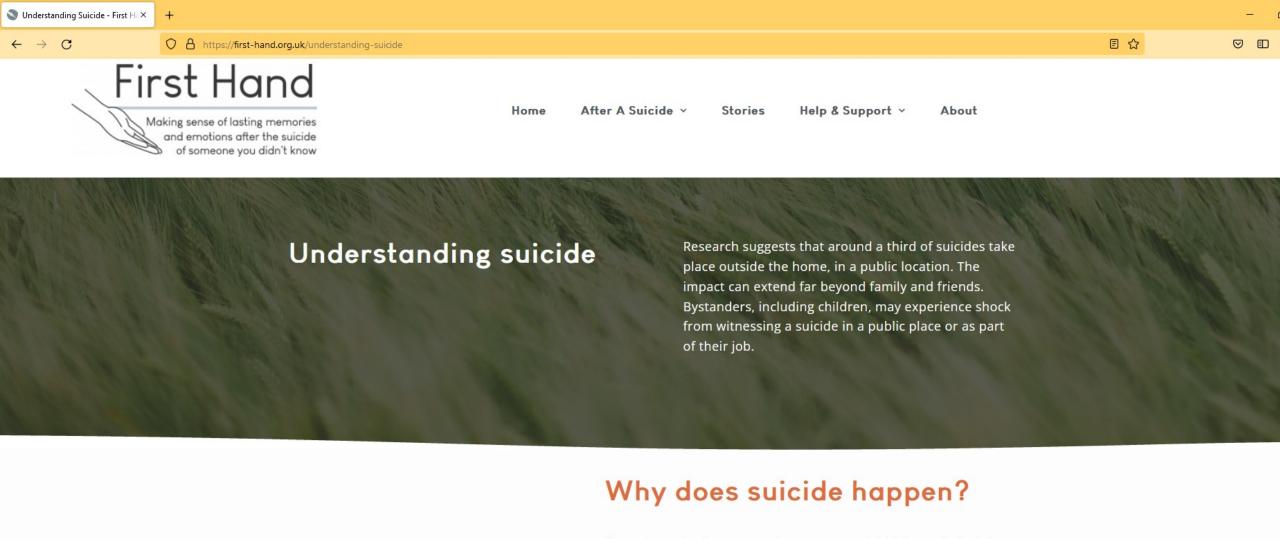
Moving on



There is a lot of information on this site, so please do not feel that you have to read everything at once. We have made it so that you can dip in and out as you need to, at different times or when your needs or feelings change.

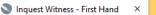
If you are affected by the suicide of a family member, friend, colleague, or classmate, you may find more relevant advice in Help is at Hand.

If you feel that you need help straight away, or you feel very distressed, please contact our friends at Samaritans on 116 123. They have a huge amount of experience in listening to and helping people like you. They are always open and calling is free of charge.



There is no simple reason why someone might take or try to take their own life. Suicide is extremely complex and the reality is that we may never know why it happened.

Some people wonder if they could have done something to prevent someone from taking their own life. This is a common reaction, especially if you were the first person on the scene. Thinking that you (or anyone else) could have prevented the suicide, is assuming that we all have far more power over the lives





https://first-hand.org.uk/inquest-witness







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What does it mean to be an inquest witness?

An inquest is usually held between six months and a year after a death has occurred (it may be earlier or more likely later than this, especially since the Covid-19 pandemic). The coroner decides who should give evidence as a witness. Some evidence is read by the coroner in court and some witnesses may be called to appear to give their witness accounts in person.

If you are called to be a witness in the Coroner's court, you can expect the coroner to take you through your statement and ask questions related to this. The questions that may be asked relate to who has died, when, where and how they came by their death.

Advice for attending an inquest





○ A https://first-hand.org.uk/stories









We were almost downplaying things.

"I felt in those early weeks and months that I would never be able to move on, that it would always dominate my thoughts."

Jo's Story



It's quite difficult to ask for help...

"It has been about six or seven years since all of this, but I can still feel emotional about it."

Pete's Story



'You know you're in shock, don't you?'

"It can be quite a scary thing to go through and the more support you can get, the safer you're going to be"

Jack's Story



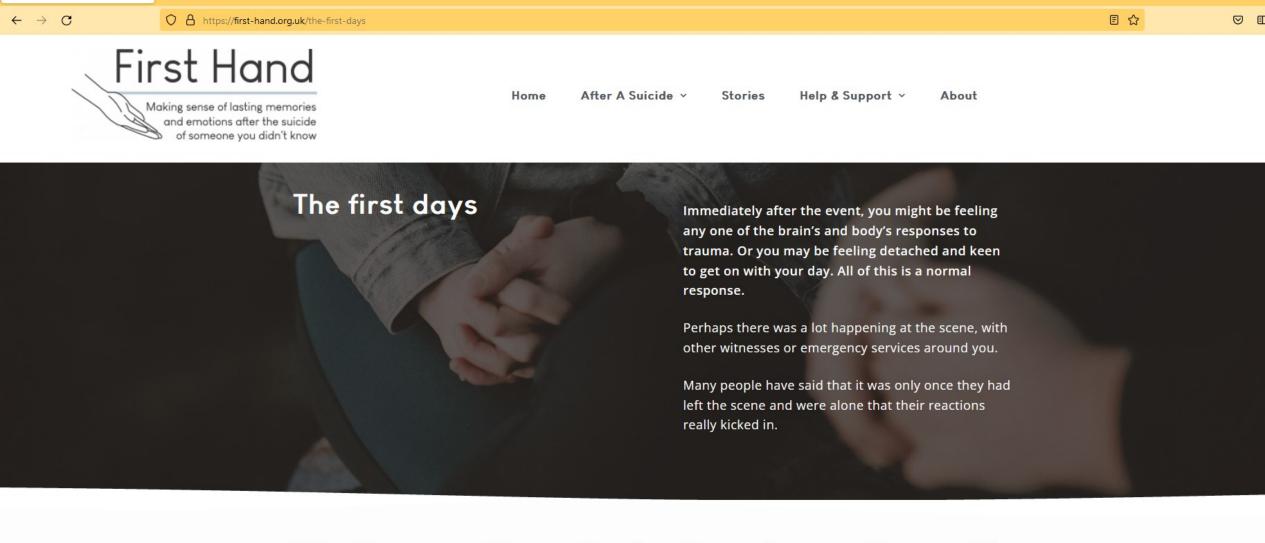
I see how these incidents affect police officers.

"We work with the police... Most of my time is spent out on patrol with the officers, no two shifts



I've been working in the railway industry for 15 years.

"When I returned to my duties, I knew I wasn't quite the same person that I'd been before. I was



The First Days - First Hand

What happens to our brain after a traumatic event?

When faced with trauma, your body and brain produce chemicals that prepare you for an emergency. This is where evolution kicks in, getting you ready to fight or escape from the danger (flight). Physically, this can lead to:

raised blood pressure increased heart rate increased sweating





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After the first few weeks

In the weeks following the incident, you may find that you are still experiencing feelings of trauma. Some people say that they were able to get back to normal in that time. Everyone will have a very different experience, but what you are going through will be normal for you.

The same advice applies; look after yourself, reach out to people for support and avoid alcohol and drugs as a way to cope.

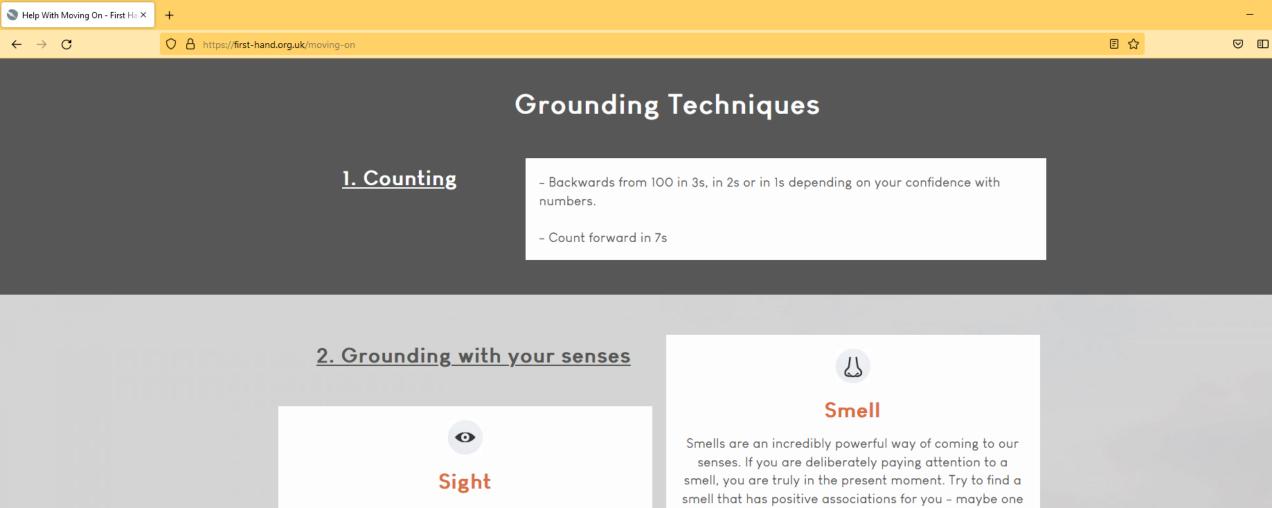
Try to continue to do the things that you enjoy; going out, walking the dog, playing sport, cooking, gardening – whatever makes you happy and fulfilled.

If you find that your symptoms are affecting your day-to-day life in a way that you are finding difficult to cope with, do not hesitate to contact your GP for help and advice. They will be able to signpost you to more specialist support if they feel that you would benefit from talking to a professional.

"I'd say to anyone who is going through this that time will really help. I felt in those early weeks and months that I would never be able to move on, that it would always dominate my thoughts." — Jo **∃** ☆

Read more stories

How can I cope with these feelings?

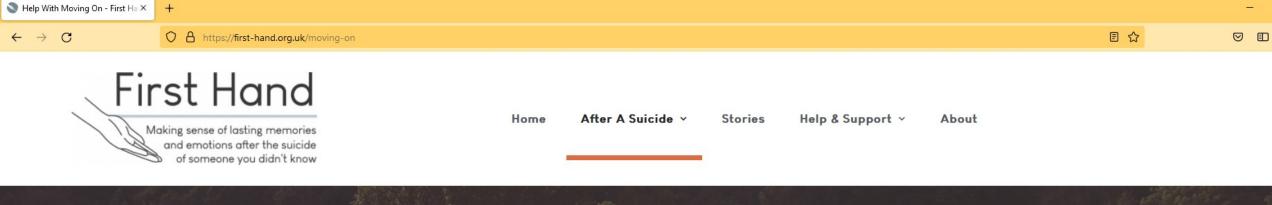


- · Take a deep breath, and then start to mentally catalogue the things you see around you. Notice even the mundane details (e.g., that electrical outlet is white, and is a little bit crooked).
 - · Choose an object and describe it in detail: colour, shape, texture, light, shadow.
- · Colours: Notice and name 5 red things, then 4 blue things, 3 green things, 2 yellow things and then 1 white thing. Or find all the green things in a room, all the red things etc.

that reminds you of happy times, or a smell which you enjoy. Carry it with you and use it to bring yourself back to the present moment if you get caught up in an unwanted memory.



Taste



Help with moving on Most people will be able to recover after being affected by suicide. For some, moving on can be more difficult. Some people may continue to be affected by feelings of trauma, or experience flashbacks and nightmares about what has happened.

Flashbacks

A flashback can feel like you are in the middle of a traumatic event all over again. It can happen any time – months or even years after the incident. It can be a very scary experience as the same stress reactions can happen to your body, causing your body to enter fight or flight mode again. It's important to note that a flashback is not the same as dwelling on the event, or finding it difficult to stop thinking about the event. We cover this more in the section on

You may experience a flashback when your memory is triggered by something you see, hear, smell, or feel. It can be













Dwelling and rumination

Rumination is when you repeatedly think about the event, what has happened since and things linked to it. This can feel out of your control. You may find yourself repeating the experience in your mind, dwelling on what could have been different, and asking yourself unanswerable questions like, "why?", "what if?" and "if only?"

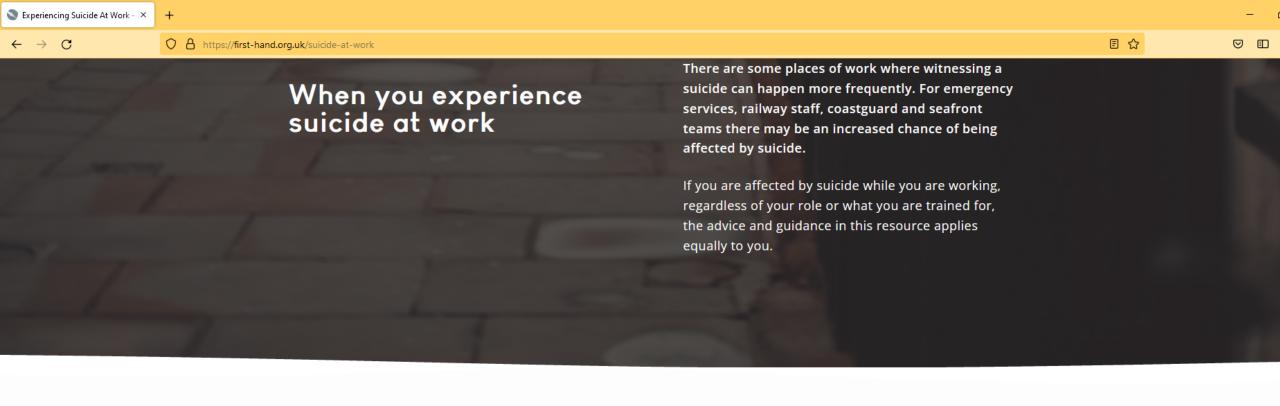
Looking back at the memory of the event can be a positive part of processing what has happened, However, if you find that you're repeatedly going over and over the same situation without getting anywhere, you need to notice and break the cycle of dwelling.

Below, we have included some activities you can try.

- Set aside time to write down your thoughts and think about what has happened, instead of letting it become a 'niggle' in the back of your mind. When the time is up, set aside what you have written down or thought about.
- Practice mindfulness. It can often help to spend a few minutes a day sitting quietly and focusing on your breathing. Relaxing music or sounds may help, and make sure you plan this time into your day, even if it's for 5 minutes.
- Talk to a friend. Talking about what has happened and your thoughts can help you to see things in a new perspective, and connection is known to help you move on.
- Focus on the positives. When you feel yourself starting to dwell, try writing down three things that make you feel safe, you enjoy, or that you are grateful for.

If you continue to have problems with rumination after giving the above tips a go or have concerns about your mental health, contact your GP to arrange an appointment.

Thinking about suicide? Worried about someone?



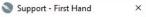
Understanding emotions after a suicide incident

It is completely normal to have a human, empathetic response to a traumatic event. It is also normal to feel a range of emotions and physical symptoms, from shock and sadness to guilt and helplessness.

Not every workplace will have policies and processes in place to support someone affected by a suicide. You can access further support or visit Grassroots Suicide Prevention to read more about the experiences of other professionals and organisations.

"I'd always known something like that could happen, but nothing could have prepared me for how it actually felt. I was signed off work for three months. My employers supported me – I had counselling and hypnotherapy. One of the things that helped me most was the support I received from colleagues."

- Heather



Find support

If you feel that you need more support to move on from what you have experienced, there are national and local organisations that will be able to help you. As a first step, we recommend that you contact your GP for an initial appointment. They can help to signpost you to the most relevant service and offer you advice on any issues you may still be having. You can find out more about booking an appointment here.

Here are just some of the national organisations who may be able to help you with some of the issues we have covered across this site.



Support After Suicide **Partnership**

Their website offers information and support for anyone impacted by a suicide.

Learn more

Mind

They provide 24/7 emotional support, by call or text with trained volunteers, or online resources, to frontline workers

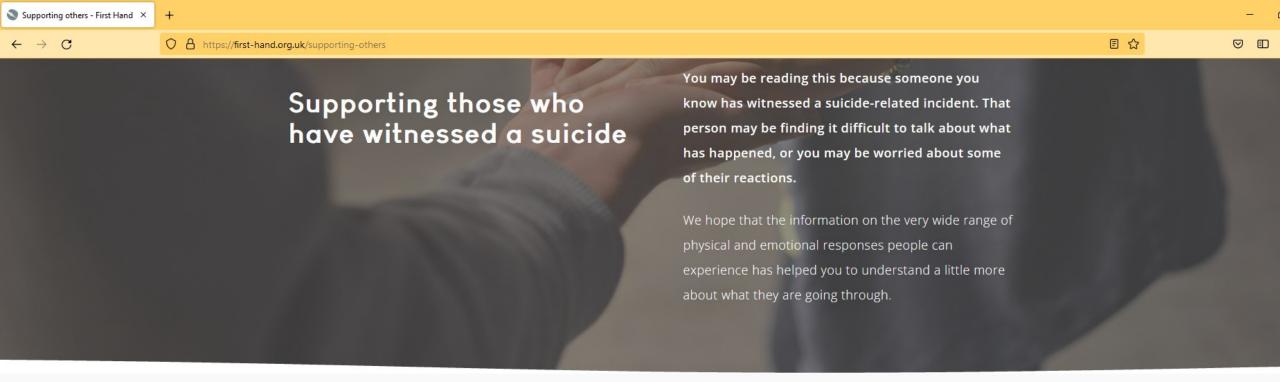
Learn more

SAMARITANS

Samaritans

They offer confidential, nonjudgemental, listening 24/7, 365 days a year. You can call them for free, their number is 116 123.

Learn more



What can I do to help?

Be there for the person, even if they do not want to talk

Just spending time with someone or being at the end of the phone to message or chat, can let them know that they are not facing their feelings alone.

Listen when they are ready to talk

We know that it is not easy to talk about suicide. It is also not easy to listen to details that you might find distressing. Finding a balance between being open to listen and protecting yourself is important. There is more advice on talking to someone about suicide in <u>Finding the Words</u>, a resource from the Support after Suicide Partnership.





https://first-hand.org.uk/supporting-children







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How to support children who witness a traumatic death

When a child or young person witnesses a traumatic event, such as a suicide-related incident involving a stranger, they can have all the same emotional and physical responses as an adult. However, their understanding and ability to express their grief may be different.

With the help of Winston's Wish, an organisation that supports bereaved children and their families, we have put together some advice on how to support children.



Help the child to understand what has happened

All children will react differently – some will want to talk about what they have seen and some will not want to discuss it yet, or at all. Encourage the child to talk when they are ready. Some children may need just the basic information – that someone has died – and others will need more detail about the death. Be prepared to add more information as time goes on and the child is ready to hear it.

It is important to be truthful and open. Remember that talking about it will not make the situation worse but can help



First Hand

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- Launched on September 10th 2021, World Suicide Prevention Day
- Twitter promotion reached approx. 2-million people on the day of the launch
- www.first-hand.org.uk website approx. 5,000 visits since launch
- SASP/Thrive London are distributing printed materials through the Met Police/BTP/TFL
- Grassroots are planning to use wallet cards to link to the website in Sussex, through connections at Sussex Police and SECAmb

Promotion and Distribution

200 wellbeing 'grab bags' launched at 25 busiest tube stations

- London Underground (LU), in partnership with Thrive LDN, has launched a pilot 'grab bag' for staff to have on hand.
- Supports LU's ongoing safeguarding programme that trains staff across the network.
- Designed by Thrive LDN, the bags provide practical support to those in need as well as aiding staff in signposting to wider support services:
 - First Hand booklet
 - Wellbeing cards
 - NHS mental health crisis lines (CYP)

London Underground 'grab bags'





Email signposting via RTSS

- The Thrive LDN Real-Time Surveillance System (RTSS) enables real-time referral of those impacted by a suicide to specialist bereavement services.
- SASP, the Metropolitan police and Thrive LDN developed additional email signposting, to provide information about the investigation and inquest, as well as support options.
- Similar functionality can be utilised to signpost all those impacted by a suicide to support, using content from First Hand.
 - Witnesses (public and professional)
 - Workplaces

Enabling targeted, specialist support

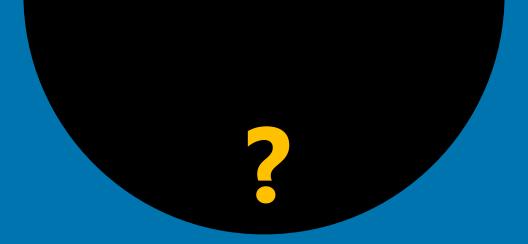




Dear [insert contact name]

You are receiving this email because you have recently been impacted by a sudden death of someone close to you, which may have been to suicide. You may feel the person has not taken their own life. The process that happens will be the same, whether or not the outcome is 'suicide'. You will have spoken to one of our Metropolitan Police officers, and given us your email information.

We would like to let you know that you are not alone, and there is support available to help you in the next few days, weeks, and months. We have put together some information below. You might feel that you are not ready for any support at the moment. We understand. The support we've included below is available to you at any time in the next few weeks, so you have time to think about what may be the most helpful.



QUESTIONS & DISCUSSION